

FACT CHECK: CBO Confirms GOP Broken Promises

On Wednesday, the Congressional Budget Office confirmed TrumpCare will kick 23 million Americans off of their coverage and force millions of Americans to pay more for less. While House Republicans continue to claim TrumpCare will benefit Americans, the facts show that's not the case. Here's a look at how some of their common claims stack up against the CBO report:

CLAIM: TrumpCare protects Americans with pre-existing conditions.

House Speaker Paul Ryan: "VERIFIED: The MacArthur amendment protects people with pre-existing conditions. ... The amendment is very clear: Under no circumstance can people be denied coverage because of a pre-existing condition." [Release, [5/2/17](#)]

Rep. Tom MacArthur (R-NJ): "I introduced an amendment to the AHCA that would make coverage of pre-existing conditions sacrosanct for all Americans.... Under no circumstance can states obtain a waiver for pre-existing condition protection—period. This option gives flexibility to the states to decrease costs while maintaining important protections." [Statement, [5/5/17](#)]

Rep. Brian Mast (R-FL): "There's about four different layers that exist to cover pre-existing conditions, beyond which one isn't even spoken about, which is one of the most important, and that's just the personal responsibility we have in our lives that's not even mentioned in there," [Talking Points Memo, [5/25/17](#)]

REALITY: TrumpCare allows insurers to discriminate against Americans with pre-existing conditions, who will face higher costs and will be ultimately unable to afford health care coverage. From CBO:

"Over time, it would become more difficult for less healthy people (including people with preexisting medical conditions) in those states to purchase insurance because their premiums would continue to increase rapidly."

"Although less healthy people might be able to purchase plans that would include a limited number of benefits, those policies would not provide sufficient financial protection..."

"[P]eople who are less healthy (including those with preexisting or newly acquired medical conditions) would ultimately be unable to purchase comprehensive nongroup health insurance at premiums comparable to those under current law, if they could purchase it at all—despite the additional funding that would be available under H.R. 1628."

CLAIM: TrumpCare will lower premiums.

Speaker Paul Ryan: "I'm actually comforted by the CBO report because it shows, yeah, we're going to lower premiums." [Business Insider, [5/25/17](#)]

REALITY: TrumpCare will increase premiums by 20% above current law next year and premiums for some groups would be entirely unaffordable. From CBO:

"H.R. 1628, as passed by the House, would tend to increase such premiums before 2020, relative to those under current law—by an average of about 20 percent in 2018 and 5 percent in 2019..."

"... [P]remiums would be so high in some areas that the plans would have no enrollment."

"For older people with lower income, net premiums would be much larger than under current law, on average."

“...[P]remiums for older people could be five times larger than those for younger people in many states, but the size of the tax credits for older people would be only twice the size of the credits for younger people.”

CLAIM: Americans on Medicaid will not lose coverage.

House Majority Leader Kevin McCarthy (R-CA): “We’re not taking a benefit away. Nobody on Medicaid is going to be taken away.” [Washington Post, [5/5/17](#)]

Rep. Tom MacArthur (R-NJ): “I want to reassure you that the Medicaid help you've gotten, nothing in this bill is cutting that...” [CNN, [5/10/17](#)]

REALITY: TrumpCare would cut \$800 million dollars by phasing out the Medicaid expansion and capping the program in 2020. From CBO:

“Medicaid enrollment would be lower throughout the coming decade, culminating in **14 million fewer Medicaid enrollees by 2026**, a reduction of about 17 percent relative to the number under current law.”

CLAIM: #TrumpCare will lower out-of-pocket costs for Americans.

House Energy & Commerce Chairman Greg Walden (R-OR): “Our plan puts states and patients in the driver's seat, creating an innovative fund to help lower premiums and other out-of-pocket costs.” [Statement, [5/24/17](#)]

REALITY: TrumpCare will substantially increase out of pocket costs for Americans by eliminating essential benefits in many parts of the country, including hospitalization, prescription drugs, mental health and substance abuse, maternity care, and more. From CBO:

“...Insurance, on average, would pay for a smaller proportion of health care costs.”

“People living in states modifying the EHBs who used services or benefits no longer included in the EHBs would experience substantial increases in out-of-pocket spending on health care.”

“In states that chose to narrow the scope of [Essential Health Benefits] EHBs, some people enrolled in nongroup insurance would experience substantial increases in what they would spend on health care.”

“Out-of-pocket payments for people who have relatively high health care spending would increase most in the states that obtained waivers from the requirements for both the EHBs and community rating.”

“Some people would have increases of thousands of dollars in a year... enrollees who use expensive drugs could see large increases in out-of-pocket spending because, in states that excluded prescription drug benefits from EHBs, the ban on annual and lifetime limits on covered benefits would no longer apply.”

CLAIM: All Americans will be able to access more affordable health coverage.

HHS Secretary Tom Price: “With our whole plan, every single American will have access to coverage. It will be coverage that’s more responsive to them, that will allow them to choose, and that will be less expensive than the current situation.” [NBC’s Today Show, [3/14/17](#)]

REALITY: TrumpCare would mean that 14 million Americans will lose health care next year and 23 million will lose their health care by 2026 and markets would become unstable. From CBO:

“CBO and JCT estimate that, in 2018, 14 million more people would be uninsured under H.R. 1628 than under current law. The increase in the number of uninsured people relative to the number projected under current law would reach 19 million in 2020 and 23 million in 2026. In 2026, an estimated 51 million people under age 65 would be uninsured, compared with 28 million who would lack insurance that year under current law.”

“...The increase would be disproportionately larger among older people with lower income—particularly people between 50 and 64 years old with income of less than 200 percent of the federal poverty level.”

“...Under H.R. 1628, as passed by the House, fewer people would have coverage through the nongroup market, Medicaid, and employment-based coverage, and more people would be uninsured in those areas than under current law.”

“...About one-sixth of the population resides in areas in which the nongroup market would start to become unstable beginning in 2020.”